Approved for use through 7/31/2006. OMB 0651-0032
U.S. Peleni and Trademer's Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid DMB conduct number. PATENT APPLICATION FEE DETERMINATION RECORD Appropriate Docker Number Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA DASIC FEE (37 CFR 1.16(al) RATE FEE RATE FEE TOTAL CLABUS OB (37 CFR 1 16(c)) minus 20 « OI1 X \$ process rocom OH MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR TOTAL CLAIMS AS AMENDED - PART II (Column 1) (Column 2) OTHER THAN (Column 3) OR SMALL ENTITY CLAIMS SMALL ENTITY HIGHEST REMAINING NOMENT PRESENT NUMBER RATE AFTER PREVIOUSLY RATE ADDI-EXTRA AMENDMENT TIONAL PAID FOR TIONAL FEE Total (3) CFR 1 16(1) Mour FEE OR Independent x 5 OR FIRST PRESENTATION OF MIRTIPLE DEPENDENT CLAIM (3) CFR 1 (6(d)) OR TOTAL TOTAL ADO'L FEE OR ADO'L FEE (Column 1) (Column 2) CLAIMS HIGHEST NUMBER ω REMAINING PRESENT RATE ENDMENT AFTER ADDI-RATE PREVIOUSLY ADDI-TIONAL AMENDAENT PAID FOR TIONAL FEE Total ALnus Independent OR Almus ₹ Of: x s FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR) 16(0)) OR TOTAL TOTAL ADOL FEE OR ADDITEE (Cotumn 1) (Column 2) (Column 3) CLAIMS HIGHEST RENAMING NUMBER PRESENT RATE ADDI-AFTER RATE PREVIOUSLY ADOI: FEE ALENDLIENT PAID FOR TIONAL NOM Dotal FEE ALnus OR Lunus OR. FIRST CHESENTATION OF MULTIME DEPENDENT CLAIM 13" CER 1 (601) CHR 101AL TOTAL ADO'L FEE If the entry in column 1 is less than the entry in column 2, write 10° in column 3.

If the "Highest Bunker Previously Paid For Brill's SPACE is less than 70, enter 70°. Cit ADO'L FEE If the "Highest Humber Previously Paid For" IN THIS SPACE is less than 3, enter "3"

to the Project Plumber Previously Paid For (Float or India or Project Is the Project Plumber Previously Paid For (Float or India including gallinging preparing, and submitting the controlled application form to the USP10. This will vary depending upon the Individual case. Any comments incluming particing preparing, and submining the controlled application form to the USPTO Time will vary depending upon the Individual case. Any comments on the amount of time your deduce in complete this form and/or suggestions for reducing this burden, should be sent to the Citief Information Officer. U.S. Patent and Trademark Officer U.S. Department of Commerce, P.O. flor 1450, Alexandria, VA 22313-1450 DO NOT SELIO FEES OR COMPLETED FORMS TO THIS ADVINESS. SEND TO. Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 10603717 Effective January 1, 2003 CLAIMS AS FILED - PART I **SMALL ENTITY** OTHER THAN (Column 1) (Column 2) TYPE ___ SMALL ENTITY **TOTAL CLAIMS** RATE FEE RATE FEE FOR NUMBER FILED NUMBER EXTRA BASIC FEE 375.00 BASIC FEE 750.00 TOTAL CHARGEABLE CLAIMS minus 20= X\$ 9= X\$18= OR INDEPENDENT CLAIMS minus 3 = X42= X84= OR MULTIPLE DEPENDENT CLAIM PRÉSENT +140= +280= OR * If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR TOTAL 6266 CLAIMS AS AMENDED - PART II OTHER THAN (Column 1) SMALL ENTITY (Column 2) OR **SMALL ENTITY** (Column 3) CLAIMS HIGHEST **AMENDMENT A** ADDI-REMAINING NUMBER ADDI-PRESENT **AFTER** RATE TIONAL TIONAL **PREVIOUSLY** RATE **EXTRA** AMENDMENT PAID FOR FEE FEE Total 20 Minus سنه ** X\$ 9= X\$18= OR Independent Minus *** X42= X84= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= +280= OR TOTAL TOTAL OR ADDIT. FEE ADDIT, FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-REMAINING ADDI-NUMBER PRESENT AMENDMENT PREVIOUSLY **AFTER** RATE TIONAL RATE TIONAL **EXTRA** AMENDMENT PAID FOR FEE FEE **Total** Minus X\$ 9= X\$18= OR Independent Minus X42= X84= FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR +140= +280= OR TOTAL TOTAL OR ADDIT, FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER ADDI-ADDI-PRESENT AFTER **PREVIOUSLY EXTRA** RATE TIONAL RATE TIONAL AMENDMENT PAID FOR FEE FEE ENDM Total Minus X\$ 9= X\$18= OR Independent Minus X42= X84= FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR +140= +280=

TOTAL

ADDIT. FEE

TOTAL

ADDIT. FEE

^{*} If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.